

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90284 020 ****61.25

DOCUMENT # 770480

1. Entity Name

NEW HOPEWELL FAMILY WORSHIP CENTER, INC.



Principal Place of Business

**3101
MIAMI FL 33142
US**

Mailing Address

**8043 NW 14TH AVE.
MIAMI FL 33147
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2345606**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~DAVIS, REV. GEORGE ROBERT~~
~~8043 NW 14TH AVE.~~
~~MIAMI FL 33147~~

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution.

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	PD	DAVIS, REV. GEORGE R.	8043 NW 14 AVE. MIAMI FL				
	VD	DAVIS, NETTIE	8043 NW 14 AVE. MIAMI FL				
	TD	MAJOR, JOHN	17530 NW 27TH COURT MIAMI FL				
	S	WILSON, DELTRA ANN	2435 NW 87TH TERR MIAMI FL				

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE George R. Davis **REQUIRED** George R. Davis 4-30-03 (305)836-4717

CR2E037 (10/02)